Image# 12940776424 PAGE 1 / 52

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	T Other Than 7	All Authorized	2 00111111111			Office Use Only
NAME OF COMMITTEE (in full)	PE OR PRINT ▼		ample: If typir or the lines.	ig, type	12FE4M5	
Political Action Committee	ee of the Ame	erican Assoc	ciation of C	Orthopae	dic Surgeo	ons
ADDRESS (number and street)	317 Massachusetts	s Avenue, NE				
Check if different	1st Floor					
than previously reported. (ACC)	Washington				DC	20002
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛦			STATE A	ZIP CODE ▲
C C00343137		3. IS THIS REPORT	\	IEW N) OR	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due Oil.	Mar 20 (M3)		lun 20 (M6)	Η.	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4)		lul 20 (M7)	-	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day		Primary (12P Convention (General (
October 15 Quarterly Report (Q3)		or the.	Convention (120)	Special (123)
January 31 Year-End Report (YE)		Election on	M = M /	D D /	Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-E Report f		General (30G	i)	Runoff (3	0R) Special (30S)
Termination Report (TER)	riopoit	Election on	11 /	06	2012	in the State of
5. Covering Period 10	/ D D / Y	2012	through	M M	/ DD D /	2012
I certify that I have examined this	Report and to the	best of my kno	wledge and b	pelief it is tru	e, correct and	complete.
Type or Print Name of Treasurer	William J Robb III,	MD				
Signature of Treasurer William	J Robb III, MD		[Electronically	Filed] D	Pate 11	30 / 2012
NOTE: Submission of false, erroneou	us, or incomplete in	nformation may su	ubject the pers	son signing th	nis Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons

10 18 26 2012 Report Covering the Period: 2012 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1409935.15 January 1, 2012 (b) Cash on Hand at 968484.70 Beginning of Reporting Period..... 1488623.97 64642.24 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1033126.94 2898559.12 6(a) and 6(c) for Column B)..... 58536.77 1923968.95 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 974590.17 974590.17 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. C	Contributions (other than loans) From:	Total Tillo I Gliou	Calcinaar Tour to Bato
(8	a) Individuals/Persons Other		
	Than Political Committees	50054.00	1212070 64
	(i) Itemized (use Schedule A)	56054.33	1313970.64
	(ii) Unitemized	, 3554.00	115500.16
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	59608.33	1429470.80
(l	o) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	0.00
(0	d) Total Contributions (add Lines		
•	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)▶	59608.33	1429470.80
2. T	ransfers From Affiliated/Other		
Р	arty Committees	0.00	0.00
ο Λ	II Loans Received	0.00	0.00
5. A	iii Loans Received	7	0.00
4. L	oan Repayments Received	0.00	0.00
5. C	Offsets To Operating Expenditures	, , , , , , , , , , , , , , , , , , , ,	
(1	Refunds, Rebates, etc.)	 	1
(0	Carry Totals to Line 37, page 5)	2022.77	22530.23
	Refunds of Contributions Made		
to	Federal Candidates and Other		
	Political Committees	3000.00	36500.00
	Other Federal Receipts		
	Dividends, Interest, etc.)	11.14	122.94
_	ransfers from Non-Federal and Levin Funds		
(8	a) Non-Federal Account	0.00	
	(from Schedule H3)	0.00	0.00
(ł	b) Levin Funds (from Schedule H5)	0.00	0.00
	=		
(0	c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	otal Receipts (add Lines 11(d),	24010.04	1400602.07
	2, 13, 14, 15, 16, 17, and 18(c))▶	64642.24	1488623.97
O T	otal Federal Receipts		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: —	1000 11110 1 01100	Calcilual Teal-IO-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	2036.77	22723.95
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	2036.77	22723.95
Transfers to Affiliated/Other Party		
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	56500.00	1372000.00
Independent Expenditures	0.00	514245.00
(use Schedule E) Coordinated Party Expenditures	0.00	314243.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
, , ,		7 7 7
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	10000.00
		0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(00011 00 17100)		
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	10000.00
Other Disbursements		5000.00
Other Disbursements	0.00	5000.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Tatal Bishows are and (add 11) as 24(2) 22		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	58536.77	1000000
25, 24, 25, 26, 27, 26(u), 29 and 50(c))	58536.77	1923968.95
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	58536.77	1923968.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	59608.33	1429470.80
4. Total Contribution Refunds (from Line 28(d))	0.00	10000.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	59608.33	1419470.80
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2036.77	22723.95
7. Offsets to Operating Expenditures (from Line 15, page 3)	2022.77	22530.23
8. Net Operating Expenditures (subtract Line 37 from Line 36)	14.00	193.72

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

6 OF 52 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Ryan M Arnold MD Date of Receipt Mailing Address 2725 S. 144th St Suite 212 2012 City State Zip Code Transaction ID: A9E751BDD7A9D4019850 ΝE Omaha 68144-5253 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Orthopaedic Surgeon Ortho West Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Adam D Bernstein MD Date of Receipt Mailing Address 28-04 Broadway 10 18 2012 City State Zip Code Transaction ID: A0DB5E37CA08D4E45BFE NJ Fair Lawn 07410-3913 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Garden State Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) C.

	9	
Full Name (Last, First, Middle Initial) Robert J Bielski MD		Date of Receipt
Mailing Address 5841 S. Maryland Ave Suit	e MC6051	10 18 2012
City	State Zip Code	Transaction ID : A173DAE45A464472CB10
Chicago	IL 60637-1654	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	
Univ Of Chicago	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
	·	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1150.00

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

52

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Haim Blecher MD Date of Receipt Mailing Address 256 Bunn Dr Suite 3B 2012 10 City Zip Code State Transaction ID: A5C06871774804FCEB27 Princeton NJ 08540-2859 Amount of Each Receipt this Period FEC ID number of contributing 3600.00 federal political committee. Name of Employer Occupation University Spine Associates Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 3600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bryan Bomberg MD Date of Receipt Mailing Address 940 Central Park Dr Ste 190 10 18 2012 City State Zip Code Transaction ID: AF427CE3BF22D4417940 CO Steamboat Springs 80487-8816 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Steamboat Orthopaedic Associates Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. David E Brown MD Date of Receipt Mailing Address 2725 S 144th St Ste 212 18 2012 City State Zip Code Transaction ID: A84F0604C0FBC496AAC7 NF Omaha 68144-5253 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Ortho West Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 4600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

Use separate schedule(s) for each category of the Detailed Summary Page

FOF	LINE	NU	MBER	:	PAGE	8	OF	52	
(che	ck only	or	ne)						
×	11a		11b		11c	12			
	13		14		15	16	,	17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	ng the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	of the American Association of Orthop	paedic Surgeons
Full Name (Last, First, Middle Initial) Jonathan E Buzzell MD Mailing Address 2725 S 144th St Ste 212	?	Date of Receipt
City	State Zip Code	10 18 2012 Transaction ID : AB1238042B9C3431381C
Omaha	NE 68144-5253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Ortho West	Orthopaedic Surgeon	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Andrew M Casden MD	·	Date of Receipt
Mailing Address Beth Israel Med Ctr/Spin		M M / D D / Y Y Y Y Y
10 Union Square East S City	te 5P State Zip Code	10 18 2012 Transaction ID : A1B9439EFCC9846329F2
New York	NY 10003-3314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	1
Beth Israel Medical Center	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Stephen A Cord MD		Date of Receipt
Mailing Address 4110 22nd PI		10 18 2012
City Lubbock	State Zip Code TX 79410-1122	Transaction ID : A75E1878F0F1C46C9B24 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Self Employed	Orthopaedic Surgeon	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	
SUBTOTAL of Receipts This Page (option	al)	1500.00
TOTAL This Period (last page this line num	mber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

_			MBER	:	PAGE	9	OF	52
(chec	k only	or	ıe)					
X	11a		11b		11c	12		
	13		14		15	16		17

Omaha NE 68144-5253 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Ortho West Receipt For: Primary General Other (specify) ▼		the name and address of any political committee to	
A. Ian D Crabb MD Mailing Address 2725 S 144th Si Ste 212 City Omaha NE State Zip Code NE 68144-5253 FEC ID number of contributing federal political committee. Name of Employer Occupation Orthopaedic Surgeon Fecapit For: Primary General Other (specify) ▼ 1000.00 Full Name (Last, First, Middle Initial) Charles C Craig MD Mailing Address 3 Hawthorne Court City State Zip Code NS 67114-6305 FEC ID number of contributing federal political committee. C Cocupation Orthopaedic Surgeon Receipt For: Primary General Orthopaedic Surgeon Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: AD\$1182EEDFR642 Amount of Each Receipt this Period Date of Receipt Transaction ID: AD\$1182EEDFR642 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID: AD\$1182EEDFR642 Transaction ID	,	the American Association of Orthop	paedic Surgeons
City Omaha FEC ID number of contributing federal political committee. Name of Employer Ontho West Receipt For: Primary General Other (specify) ▼ State Zip Code KS 67114-6305 Fell Name (Last, First, Middle Initial) Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Date of Receipt	A. Ian D Crabb MD		M = M / D = D / Y = Y = Y
Transaction ID : ADDITION	•	·	Transaction ID: A398E668DCCB142B7B
Ortho West Receipt For: Primary General Aggregate Year-to-Date ▼	federal political committee.	C	500.00
Amount of Each Receipt Date of Receipt	Ortho West Receipt For: Primary General	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
State Zip Code Newton KS 67114-6305 Amount of Each Receipt this Period	3. Charles C Craig MD		†
Name of Employer Newton Medical Center Receipt For: Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) C. Richard L Crank DO Mailing Address 1502 Lexington Ct City State Zip Code Warrensburg MO 64093-2992 FEC ID number of contributing federal political committee. Name of Employer Western Missouri Medical Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt MO 64093-2992 Transaction ID : A9112BC80003343- Amount of Each Receipt this Period Orthopaedic Surgeon Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00	Newton FEC ID number of contributing	KS 67114-6305	Transaction ID: AD51182EEDFBC43E6A
Other (specify) ▼ 2000.00 Full Name (Last, First, Middle Initial) Richard L Crank DO Mailing Address 1502 Lexington Ct City Warrensburg FEC ID number of contributing federal political committee. Name of Employer Western Missouri Medical Center Receipt For: Primary General Other (specify) ▼ 2000.00 Date of Receipt Transaction ID: A9112BC80003343- Amount of Each Receipt this Period Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Name of Employer Newton Medical Center Receipt For:	Orthopaedic Surgeon	
Aggregate Year-to-Date Mailing Address 1502 Lexington Ct Date of Receipt MM	Other (specify) ▼	2000.00	
FEC ID number of contributing federal political committee. Name of Employer Western Missouri Medical Center Receipt For: Primary Other (specify) ▼ Amount of Each Receipt this Period 1000.00	C. Richard L Crank DO Mailing Address 1502 Lexington Ct City	·	10 18 2012 Transaction ID : A9112BC800033434D96
Western Missouri Medical Center Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	FEC ID number of contributing		Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)	Western Missouri Medical Center Receipt For: Primary General	Orthopaedic Surgeon Aggregate Year-to-Date ▼	
	SUBTOTAL of Receipts This Page (optional))	2500.00
TOTAL This Period (last page this line number only)		<u> </u>	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

52

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) James J Dietz MD Date of Receipt Mailing Address 23829 Little Mack Ste 100 2012 10 City Zip Code State Transaction ID : A98EB9B2533A344C7983 Saint Clair Shores MI 48080-1186 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation St Clair Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kenneth A Egol MD Date of Receipt Mailing Address 301 E 17th St Ste 1402 10 18 2012 City State Zip Code Transaction ID: ACA85E4981DF848FE87A NY New York 10003-3804 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation NYU School of Medicine Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kevin S Finnesey MD Date of Receipt Mailing Address 9 Brownstone Way 18 2012 Apt 109 City State Zip Code Transaction ID: A452D34C7FD4241D0841 NJ Englewood 07631-1214 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Premier Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 875.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 11 OF 52 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) David Fowler MD Date of Receipt Mailing Address 5555 Peachtree Dunwoody Rd NE Suite 101 2012 10 City Zip Code State Transaction ID: AEC0D669ED4874EC9A20 GA Atlanta 30342-1710 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Paul T Geibel MD Date of Receipt Mailing Address 18626 Hardy Oak Blvd 300 10 18 2012 City State Zip Code Transaction ID: A57F3F2D955C24AD493D TX San Antonio 78258-4228 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Frank P Giammattei MD Date of Receipt Mailing Address Professional Office Bldg 2 Ste 324 1 Medical Center Blvd 10 18 2012 City State Zip Code Transaction ID: AB87D007BD81F4A0C982 PΑ Chester 19013-3902 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Premier Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

52

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Robert Joseph Goitz MD Date of Receipt Mailing Address Dept of Ortho Surgery 3471 5th Ave Ste 911 2012 10 City Zip Code State Transaction ID: AD30528A03F094019A00 PΑ Pittsburgh 15213-3232 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **UPMC** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard E Grant MD Date of Receipt Mailing Address 7909 Heather Road 10 18 2012 City State Zip Code Transaction ID: AC9A570DF5E164852869 PA Elkins Park 19027-1207 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Univ Hospital Case Medical Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joanne Halbrecht MD Date of Receipt Mailing Address 3000 Center Green Dr Ste 150 18 2012 City Zip Code State Transaction ID: AA1818A61BE8643AF9A8 CO Boulder 80301-2364 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 900.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF 52 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Christopher D Hamilton MD Date of Receipt Mailing Address 2400 Bahamas Dr, #200 2012 10 City Zip Code State Transaction ID: A7028EBC0C54E42F1A2F CA Bakersfield 93309-0747 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Southern California Ortho Institute Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. David E Hassinger MD Date of Receipt Mailing Address 7979 W. Rifleman St 10 18 2012 City State Zip Code Transaction ID: AFEA62D5A31C64B63B42 ID Boise 83704-9066 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Alan E Hibberd MD Date of Receipt Mailing Address 23704 Up Mountain Rd 18 2012 City Zip Code State Transaction ID: A717BAE7CC59349D081B TX San Antonio 78255-2002 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation San Antonio Orthopaedic Group Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR L	INE NU	MBER:	PAGE	1	4	OF
Use separate schedule(s)	(check	only on	e)				
for each category of the Detailed Summary Page	X 11	1a	11b	11c		12	
	15	2	1/	15		16	

52

	I Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full) Political Action Committee of t	the American Association of Orthor	paedic Surgeons
Full Name (Last, First, Middle Initial) A. Kirk Hutton MD Mailing Address 2725 S 144th St Ste 212		Date of Receipt
		10 18 2012
City	State Zip Code	Transaction ID : A4D8A2DA28ECB4C789FD
Omaha	NE 68144-5253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Ortho West	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) 3. Joshua J Jacobs MD		Date of Receipt
Mailing Address 1611 W. Harrison St		M = M / D = D / Y = Y = Y
Ste 300 City	State Zip Code	10 18 2012
Chicago	IL 60612-4861	Transaction ID: AFE5313B0084E4E07A0D Amount of Each Receipt this Period
		Amount of Each neceipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Midwest Orthopaedics at Rush	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Paul G Johnson MD		Date of Receipt
Mailing Address 6490 Excelsior Blvd Ste E4	00	10 18 2012
City	State Zip Code	Transaction ID : A91CF46457B524D929C3
Minneapolis	MN 55426-4721	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	-
Park Nicollet Clinic	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1100.00	
SUBTOTAL of Receipts This Page (optional).	>	1100.00
TOTAL This Period (last page this line number	er only)	7

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

52

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Daniel G Kalbac MD Date of Receipt Mailing Address 6701 Sunset Dr Ste 201 PO Box 430430 2012 10 City State Zip Code Transaction ID: A483CF1656D1E4373AD6 FL South Miami 33143-4529 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Ortho & Sports Med Ctr of Miami Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Glenn C Landon MD Date of Receipt Mailing Address 2nd FI Orthopaedics 2727 W Holcombe Blvd 10 18 2012 City State Zip Code Transaction ID: A6FEB5304DC6F437B90C TX Houston 77025-1669 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Kelsey-Seybold Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Christopher Lawrence Lee MD Date of Receipt Mailing Address 23829 Little Mack Ste 100 10 18 2012 City Zip Code State Transaction ID: A22D6F458B57C4AF1BA3 MI Saint Clair Shores 48080-1186 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation St Clair Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 16 OF

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a	11c 12 15 16	17					
any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.									

NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) David A McGuire MD Date of Receipt Mailing Address 4100 Lake Otis Pkwy Ste 320 2012 10 City State Zip Code Transaction ID: ACC8EE68401B84522803 ΑK 99508-5231 Anchorage Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Orthopaedic Surgeon Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian M Mehling MD Date of Receipt Mailing Address 800 Montauk Hwy 10 18 2012 City State Zip Code Transaction ID: A735D6FB7F1444CDBA8B West Islip NY 11795-4919 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Milan Mirich MD Date of Receipt Mailing Address 621 3rd St South 2012 18 City State Zip Code Transaction ID: AA5E075D3F43D4938B40 MT Glasgow 59230-2604 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation **FMDH Orthopaedics** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1350.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

52

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Randall Dean Neumann MD Date of Receipt Mailing Address 2725 S 144th St Ste 212 2012 10 City Zip Code State Transaction ID: A1EF7FCE8A33445D2975 NE Omaha 68144-5253 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Ortho West Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Raymond C Noellert MD Date of Receipt Mailing Address 52 Port Royal Way 10 18 2012 City State Zip Code Transaction ID : AB0804EA9060046329D3 FL Pensacola 32502-5774 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Sacred Heart Health System Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sean J O'Donnell MD Date of Receipt Mailing Address Middlesex Ortho Surgeons 10 18 2012 410 Saybrook Rd Ste 100 Zip Code City State Transaction ID: A6901E13775904D5A9AE CT Middletown 06457-4780 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 С federal political committee. Name of Employer Occupation Middlesex Orthopaedic Surgeons Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 3250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

		R LINE			:	PAGE	_ 1	18	OF	5	52
Use separate schedule(s) for each category of the	(che	ck only	or	ne)							
Detailed Summary Page	<u> </u> ×	11a		11b		11c		12			
, ,		13		14		15		16			17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)	e American Association of Orthop	
Full Name (Last, First, Middle Initial) Douglas W Pahl MD Mailing Address 6500 -1 Green Island Dr		Date of Receipt
City	State Zip Code	10 18 2012
Columbus	GA 31904-2245	Transaction ID : A2915A9D57DC94B088A0
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
The Hughston Clinic	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) 3. Richard T Perry MD		Date of Receipt
Mailing Address 23829 Little Mack Ste 100		10 18 2012
City	State Zip Code	Transaction ID : A956FADAEB5A74EAE844
Saint Clair Shores	MI 48080-1186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St Clair Orthopaedics	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Steve A Petersen MD		Date of Receipt
Mailing Address 10753 Falls Rd Pavillion 2 Ste 305		10 18 2012
City	State Zip Code	Transaction ID : A0BAC7D0114D1443E92C
Lutherville Timonium	MD 21093-4535	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Johns Hopkins Medical Center	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		850.00
TOTAL This Period (last page this line number	<u> </u>	

	FOR LINE NUMBER: PAGE 19 OF	52
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b 11c 12	
, ,		17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial) John T Quigley MD Mailing Address 301 W. Huntington Dr City Arcadia FEC ID number of contributing federal political committee. Name of Employer Congress Orthopedics	State Zip Code CA 91007-3462 C Occupation Orthopaedic Surgeon	Date of Receipt 10 18 2012 Transaction ID: A0B2FB5DBE0134679BDB Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Samar Kumar Ray MD Mailing Address 2725 S 144th St Ste 212 City	State Zip Code	Date of Receipt 10 18 2012 Transaction ID: A5D9F5B9666834304821
Omaha FEC ID number of contributing federal political committee.	NE 68144-5253	Amount of Each Receipt this Period 500.00
Name of Employer Ortho West Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Michael F Sacco MD Mailing Address 120 Norlyn Dr City Walnut Creek	State Zip Code CA 94596-4258	Date of Receipt 10 18 2012 Transaction ID : A45BE86E0193342A591F
FEC ID number of contributing federal political committee. Name of Employer East Bay Sports Medicine Receipt For: Primary General Other (specify)	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)		2000.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 20 OF 52 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Ralph T Salvagno MD Date of Receipt Mailing Address 13 Western Maryland Parkway, #104 2012 10 City Zip Code State Transaction ID: A1B3E474C4B564F8F99E MD Hagerstown 21740-5146 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Center for Joint Surgery Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charles P Schneider MD Date of Receipt Mailing Address 206 E Elm St 10 18 2012 City State Zip Code Transaction ID: A214985EEE80149D8B97 ID Caldwell 83605-4815 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nicholas J Schoch MD Date of Receipt Mailing Address 23829 Little Mack 10 18 2012 Suite 100 City State Zip Code Transaction ID: AA448745D41924BACB2B MI Saint Clair Shores 48080-1186 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation St Clair Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 21 OF 52 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Kanwaldeep S Sidhu MD Date of Receipt Mailing Address 23829 Little Mack Ste 100 2012 10 City Zip Code State Transaction ID: AEDC4948A31414996AEB Saint Clair Shores MI 48080-1186 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation St Clair Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

Full Name (Last, First, Middle Initial) William Stuart Singer MD		Date of Receipt
Mailing Address 2725 S 144th St Ste 212		10 18 _2012 _
City	State Zip Code	Transaction ID : AF71B7773B4034C99A2F
Omaha	NE 68144-5253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Ortho West	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last. First. Middle Initial)		

c. Michael A Thompson MD Date of Receipt Mailing Address 25005 Farnam Circle 10 18 2012 City State Zip Code Transaction ID: A32750AC186ED4F32B6C NE Waterloo 68069-4694 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Ortho West Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

В.

	FOR	LINE	NU	MBER	:	PAGE	2	22 OF	:
Use separate schedule(s)	(che	(check only one)							
for each category of the Detailed Summary Page	X	11a		11b		11c		12	
		13		14		15		16	

52

	tatements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full)	e American Association of Orthopa	
Full Name (Last, First, Middle Initial) Michael C Thompson MD Mailing Address 21925 Stanford Circle		Date of Receipt
City Elkhorn	State Zip Code NE 68022-2234	Transaction ID : A8FA19E4F8038428B979 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Ortho West Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Laura Lowe Tosi MD Mailing Address Orthopaedic Surgery 111 Michigan Ave NW	Chata 7in Onlin	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington FEC ID number of contributing federal political committee.	State Zip Code DC 20010-2916	Transaction ID : A3B4549869159437CBDF Amount of Each Receipt this Period 250.00
Name of Employer CNMC Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Daniel M Ward MD Mailing Address 830 Boylston St Suite 106		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chestnut Hill FEC ID number of contributing	State Zip Code MA 02467-2502	Transaction ID : A878319D727EC4A4FB7A Amount of Each Receipt this Period
federal political committee.	C	1000.00
Name of Employer Longwood Orthopedics Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
TOTAL This Period (last page this line number	only)	

	FOR LINE	NUMBER	: PAGI	= 23 OI	г				
Use separate schedule(s)	(check onl	(check only one)							
for each category of the	X 11a	11b	11c	12					
Detailed Summary Page	/\	Ш '''	Ш''С	⊢ '' ²	_				
	1 13	14	15	16					

	Statements may not be sold or used by any personal he name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Orthor	paedic Surgeons
Full Name (Last, First, Middle Initial) A. Bruce Ross Wheeler MD Mailing Address 1301 Nisqually St		Date of Receipt
City Steilacoom FEC ID number of contributing federal political committee.	State Zip Code WA 98388-2503	Transaction ID : A717E4FDDD5E149D299D Amount of Each Receipt this Period 250.00
Name of Employer Group Health Permanente Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Roland H Winter MD Mailing Address 5660 E Acorn Ct City Stockton FEC ID number of contributing federal political committee.	State Zip Code CA 95212-2633	Date of Receipt 10 18 2012 Transaction ID: A9F8870A46CA6494FB9F Amount of Each Receipt this Period 250.00
Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Christopher Zingas MD Mailing Address 23829 Little Mack Ste 100 City Saint Clair Shores FEC ID number of contributing federal political committee. Name of Employer St Clair Orthopaedics Receipt For: Primary General Other (specify)	State Zip Code MI 48080-1186 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 10 18 2012 Transaction ID: AD412B1EC997E44D0B79 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional).	>	750.00
TOTAL This Period (last page this line number	er only)	

	FOR LINE NUMBER: PAGE 24	OF							
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page	X 11a 11b 11c 1	2							
	13 14 15 1	6							

52

	Statements may not be sold or used by any per- he name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Orthor	paedic Surgeons
Full Name (Last, First, Middle Initial) Steven L Buckley MD Mailing Address 6007 Macon Ct		Date of Receipt
City	State Zip Code	10 19 2012
Huntsville	AL 35802-1931	Transaction ID : A5B0BCA470F2D459B81D
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	1
TOC	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	
Full Name (Last, First, Middle Initial) P Merrill White MD Address A	•	Date of Receipt
Mailing Address 909 Woodside St		10 20 _2012 _
City	State Zip Code	10 20 2012 Transaction ID : ACD6A8E1206AF474DBA7
Knoxville	TN 37919-7764	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer TOC	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Brian C Aamlid MD	•	Date of Receipt
Mailing Address 1210 W 18th Street Ste G0	1	10 22 2012
City	State Zip Code	Transaction ID : A2083E568F0C84E72BE1
Sioux Falls	SD 57104-4651	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Sanford Ortho and Sports Med	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional).		1250.00
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) ITEMIZED F

FOR LINE NUMBER: PAGE 25 OF

RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(che	ck only 11a 13	one) 11b 14	11c	12 16	17	
copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions								

Any information of

or for commercial purposes, other than using the	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of the	he American Association of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial) 1. James Spiegel MD		Date of Receipt
Mailing Address 2907 Chanticleer Ave First Floor		10 23 2012
City	State Zip Code	Transaction ID : A73DA462F405147E5AA5
Santa Cruz	CA 95065-1815	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	•
Palo Alto Medical Foundation Group	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial)		8. (5.)
Mark A Spelich MD		Date of Receipt
Mailing Address 7979 W. Rifleman St Suite 1	00	10 26 2012
City	State Zip Code	10 26 2012 Transaction ID : A2682C0D925794A36BD7
Boise	ID 83704-9066	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	1000.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) C. Gregg Berkowitz MD	1	Date of Receipt
Mailing Address Pond View Professional Par	'k	M M / D D / Y Y Y Y Y
301 Professional View Dr		10 29 2012
City	State Zip Code	Transaction ID: A6F03BAA1B5D64942B9D
Freehold	NJ 07728-7904	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Advanced Orthopaedic Centers	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)	>	3000.00
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 26 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

52

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Julius Stephen Brecht MD Date of Receipt Mailing Address 25 Chatham Rd 2012 10 City Zip Code State Transaction ID: AF70D731775F344F391B Longmeadow MA 01106-1203 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation New England Ortho Surgeons Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. John P Buckley MD Date of Receipt Mailing Address 305 Bryant Dr E 10 29 2012 City State Zip Code Transaction ID: A8E058DF65C2F4A019CB AL Tuscaloosa 35401 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation University Orthopaedic Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. William A Crotwell, III MD Date of Receipt Mailing Address 4217 River Oaks Lane 10 29 2012 City State Zip Code Transaction ID: A51E3AC1A733B4D69807 AL Mobile 36619-9552 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Alabama Orthopaedic Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE	27 OF	52
Use separate schedule(s) for each category of the	(check only one)			
Detailed Summary Page	X 11a 11b	11c	12	
	13 14	15	16	17

	the name and address of any political committee	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthor	paedic Surgeons
Full Name (Last, First, Middle Initial) Matthew L Graves MD Mailing Address Dept of Ortho Surg & Reha 2500 N State St City Jackson FEC ID number of contributing federal political committee. Name of Employer Univ of Missouri Receipt For: Primary General Other (specify)		Date of Receipt 10 29 2012 Transaction ID: A5DC5D9F321BA4419872 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Darron M Jones MD Mailing Address 250 S Crescent Dr		Date of Receipt
City Mason City FEC ID number of contributing federal political committee. Name of Employer Mason City Clinic Receipt For: Primary General Other (specify)	State Zip Code IA 50401-2926 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Transaction ID: A9617BEC39ACD40C4843 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Cyrus S Kump II, MD Mailing Address 118 Tempsford Lane		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Richmond FEC ID number of contributing federal political committee. Name of Employer HCA Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code VA 23226-2319 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Transaction ID : AD57EB68E7BC34A0483D Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional).	•	750.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

52

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Keith T Lonergan MD Date of Receipt Mailing Address 406 Chancery Lane 2012 10 City Zip Code State Transaction ID: A4CB9A11FEC774B45A0F SC Simpsonville 29681-3677 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Greenville Hospital System Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. James H Lubowitz MD Date of Receipt Mailing Address 1219-A Gusdorf Rd Ste A 10 29 2012 City State Zip Code Transaction ID: AAC9F48105839420DAED NM Taos 87571-6361 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Taos Orthopaedic Institute Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas L Martin MD Date of Receipt Mailing Address 900 Buffalo Rd Frnt 1 10 29 2012 City State Zip Code Transaction ID: ABBF584F757FE4C1C835 PΑ Lewisburg 17837-1206 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Sun Orthopaedic Group Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) for each category of the Detailed Summary Page

l LOL	1 LIIVE	INU	IVIDER		FAGE	- 4	29	OF	52
(check only one)									
I ` 	1		i		١		1		
	11a		11b		11c		12		
	13		14		15		16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Receipt First Receipt this Period	NAME OF COMMITTEE (In Full)	the name and address of any political committee to	
Mailing Address 569 Skyline Dr Ste 100 City Jackson TN 38301-3911 FEC ID number of contributing federal political committee. C Folit Name (Last, First, Middle Initial) Steven Nowicki MD Mailing Address Laurel Bone & Joint Clinic 424 S 13th Ave Box 2666 City Laurel Name of Employer State MS 39440-4345 FEC ID number of contributing federal political committee. C Date of Receipt Transaction ID: AB80882033E494748972 Amount of Each Receipt this Period Foo.00 Tothopaedic Surgeon Aggregate Year-to-Date ▼ Total Name (Last, First, Middle Initial) Steven Nowicki MD Mailing Address Laurel Bone & Joint Clinic 424 S 13th Ave Box 2666 City Laurel FEC ID number of contributing federal political committee. C C Transaction ID: ABDA5C6786F8941CA88 Amount of Each Receipt MS 39440-4345 FEC ID number of contributing federal political committee. C Aggregate Year-to-Date ▼ Transaction ID: ABDA5C6786F8941CA88 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Transaction ID: ABDA5C6786F8941CA88 Amount of Each Receipt MM 10 29 2012 Transaction ID: ABDA5C6786F8941CA88 Amount of Each Receipt MM 10 29 2012 Transaction ID: ABDA5C6786F8941CA88 Amount of Each Receipt MM 10 29 2012 Transaction ID: ABDA5C6786F8941CA88 Amount of Each Receipt this Period	A. Robert E Mitchell MD Mailing Address 695 Hill Country Dr Ste B City Kerrville FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General	TX 78028-6074 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	10 29 2012 Transaction ID : A4176AB13325C47609BB Amount of Each Receipt this Period
Date of Receipt Mailing Address Laurel Bone & Joint Clinic 424 S 13th Ave Box 2666 City Laurel State Zip Code MS 39440-4345 FEC ID number of contributing federal political committee. Name of Employer Laurel Bone & Joint Clinic Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D J / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Mailing Address 569 Skyline Dr Ste 100 City Jackson FEC ID number of contributing federal political committee. Name of Employer Sports, Orthopedics & Spine Receipt For: Primary General	TN 38301-3911 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	10 29 2012 Transaction ID: AB80882033E494748972 Amount of Each Receipt this Period
1250.00	Mailing Address Laurel Bone & Joint Clinic 424 S 13th Ave Box 2666 City Laurel FEC ID number of contributing federal political committee. Name of Employer Laurel Bone & Joint Clinic Receipt For: Primary General	State Zip Code MS 39440-4345 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	10 29 2012 Transaction ID : A8DA5C67B6F8941CA8BE Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)) >	1250.00

	FOR LINE I	NUMBER:	: PAGI	∃ 30 OF	- 5
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou ourmany r ago	13	14	15	16	\square_1

	nd Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Ortho	paedic Surgeons
Full Name (Last, First, Middle Initial) Edward H Saer III, MD Mailing Address 600 S. McKinley St Suite	210	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Little Rock	State Zip Code AR 72205-5220	Transaction ID : A18CEB32AFD044FC88FA
FEC ID number of contributing federal political committee.	C 72205-5220	Amount of Each Receipt this Period 250.00
Name of Employer Arkansas Specialty Spine Center Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 875.00	
Full Name (Last, First, Middle Initial) Thomas S Samuelson MD		Date of Receipt
Mailing Address Corporate Medical Plaza I 10701 Nall Ave Ste 200 City Leawood	State Zip Code KS 66211-1358	10 29 2012 Transaction ID : A086D39852B0E4DBF99F Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Kansas City Bone & Joint	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	
Full Name (Last, First, Middle Initial) C. William C Schroer MD		Date of Receipt
Mailing Address 12266 DePaul Dr Ste 220		10 29 2012
City Bridgeton	State Zip Code MO 63044-2514	Transaction ID : AC8B9356493694AF99F9 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer SSM Orthopedics Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	ber only)	1125.00
TOTAL THIS FERIOU (last page this line num	Del Ollis)	

FOR LINE NUMBER: PAGE 31 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

52

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) James F Scoggin III, MD Date of Receipt Mailing Address PO Box 25823 2012 10 City Zip Code State Transaction ID: ADE416D89FD9C4575BC9 96825-0823 Honolulu HI Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Isaac Smulyan MD Date of Receipt Mailing Address 3518 Barton Oaks Road 10 29 2012 City State Zip Code Transaction ID: A5F55AB98FD9E44CAA52 MD Pikesville 21208-4301 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Ortho Maryland Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Alan Scott Tuckman MD Date of Receipt Mailing Address 2933 Cotswold Rd 10 29 2012 City State Zip Code Transaction ID: A201DFCE16CFE464DBE1 PΑ Reading 19608-9690 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Lancaster Orthopedic Group Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE	NUMBER	:	PAGE	: 3	32
Use separate schedule(s)	(check only	y one)				
for each category of the Detailed Summary Page	X 11a	11b		11c		12
	12	14		15		16

OF

52

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

	1 1 -7 -1 - 3	7 1 1 1 1 1 1 1 1 1	
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthopa	aedic Surgeons
۸.	Full Name (Last, First, Middle Initial) Jeffery P Beckenbaugh DO Mailing Address 4121 8th St SW City Rochester FEC ID number of contributing federal political committee.	State Zip Code MN 55902-8751	Date of Receipt 10 30 2012 Transaction ID: A4DCABA446ACE4E9899A Amount of Each Receipt this Period
	Name of Employer Olmsted Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 900.00	
3.	Full Name (Last, First, Middle Initial) Kenneth J Edwards MD Mailing Address 183 Peace Blvd City Saint Joseph FEC ID number of contributing federal political committee. Name of Employer Southwest Michigan Ctr for Orthopedics Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MI 49085-9146 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	Full Name (Last, First, Middle Initial) Daniel William Green MD Mailing Address 535 E 70th St City New York FEC ID number of contributing federal political committee. Name of Employer Hospital for Special Surgery Receipt For: Primary General Other (specify)	State Zip Code NY 10021-4823 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1670.00	Date of Receipt 10 30 2012 Transaction ID : A23D9B798D7DE49338D1 Amount of Each Receipt this Period 167.00
s	UBTOTAL of Receipts This Page (optional)	<u> </u>	367.00
Т	OTAL This Period (last page this line number of	only)	

	FOR LINE	NOMREK	:	PAGE	-
Use separate schedule(s) for each category of the	(check only	one)			
Detailed Summary Page	X 11a	11b		11c	
	12	1.4		4.5	Г

33 OF

12

	d Statements may not be sold or used by any per the name and address of any political committee					
NAME OF COMMITTEE (In Full) Political Action Committee of	NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons					
Full Name (Last, First, Middle Initial) David A Halsey MD Mailing Address 192 Tilley Drive		Date of Receipt				
City South Burlington	State Zip Code VT 05403-4440	Transaction ID : A0415F738A6994DA5999 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	Cocumation	50.00				
Name of Employer University of Vermont Medical Group Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial) Scott Edward Porter MD Mailing Address Dept of Ortho, Acad Serv 701 Grove Rd 2nd Fl Suprt City Greenville FEC ID number of contributing federal political committee. Name of Employer Greenville Hospital System Receipt For: Primary General Other (specify)	Twr State Zip Code SC 29605-5601 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 850.00	Date of Receipt 10 30 2012 Transaction ID: AFF355D52E3E049CEAD6 Amount of Each Receipt this Period 85.00				
Full Name (Last, First, Middle Initial) Bonhomme Joseph Prud'homm Mailing Address 3400 Health Sciences Cen PO Box 9196 City Morgantown FEC ID number of contributing federal political committee. Name of Employer West Virginia University Receipt For: Primary Other (specify)		Date of Receipt 10 30 2012 Transaction ID: A16766A7936794ED3BFD Amount of Each Receipt this Period 85.00				
SUBTOTAL of Receipts This Page (optional)	<u> </u>	220.00				
TOTAL This Period (last page this line numb	er only)					

	FOR LINE	NUMBER	:	PAGE	3	34	OF	
Use separate schedule(s) for each category of the	(check only	one)						
Detailed Summary Page	X 11a	11b		11c		12		
, 0	1 12	1 14		15		16		

52

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)	he American Association of Orthop	
Full Name (Last, First, Middle Initial) Marc J Rosen MD Mailing Address 5605 W Eugle Ste 111		Date of Receipt
City	State Zip Code AZ 85304-1273	Transaction ID : AA2F8D98F002F45F9828
Glendale	nc 003U4-1213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	†
Ortho Surg Network of North America	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) Paul Strawn Sherbondy MD		Date of Receipt
Mailing Address Ste 112, MC-UP02		M = M / D = D / Y = Y = Y
1850 E Park Ave	State Zip Code	10 30 2012 Transportion ID : AFSB 4242064074450405
State College	PA 16803-6706	Transaction ID : AF8BA3A3964974AF0A0F Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	
Penn State Hershey	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 583.31	
Full Name (Last, First, Middle Initial) Christopher A Wills MD		Date of Receipt
Mailing Address 725 W La Veta Ave Ste 260	Mailing Address 725 W La Veta Ave Ste 260	
City	State Zip Code	10 30 2012 Transaction ID : A886C8FC389724B6AA35
Orange	CA 92868-4439	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	588.00	
SUBTOTAL of Receipts This Page (optional).		267.33
TOTAL This Period (last page this line number	<u> </u>	
To the Time I offer (last page time mile number	······································	

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FOR LINE	i: PAGE	35 OF	52		
	(check only one)					
	X 11a	11b	11c	12		
	13	14	15	16	17	

	ng the name and address of any political committee		
NAME OF COMMITTEE (In Full) Political Action Committee of	of the American Association of Ortho	paedic Surgeons	
Full Name (Last, First, Middle Initial) John Robert Starynski MD Mailing Address 2448 Northern Rd		Date of Receipt	
Mailing Address 8118 Northern Rd	11 04 2012		
City	State Zip Code WI 54548-9103	Transaction ID : A62AE625172E341DF895	
Minocqua EEC ID number of contributing		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer	Occupation		
Mayo Clinic Health System	Orthopaedic Surgeon	_	
Receipt For: Primary General	Aggregate Year-to-Date ▼		
Other (specify)	250.00		
Full Name (Last, First, Middle Initial) 3. William F Binder MD		Date of Receipt	
Mailing Address 25 Riviera Dr			
City	State Zip Code	11 09 2012 Transaction ID : A475FC2EBB86E4CA9829	
Lake Havasu City	AZ 86403-5713	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	2000.00	
Name of Employer	Occupation	1	
Lakeside Orthopedic Institute	Orthopaedic Surgeon		
Receipt For: Primary General	Aggregate Year-to-Date ▼		
Other (specify)	2000.00		
Full Name (Last, First, Middle Initial) . H Chester Boston Jr, MD		Date of Receipt	
Mailing Address 305 Bryant Dr East P.O. Box 2447		11 09 2012	
City	State Zip Code	Transaction ID : A0CC423B00D7D438EB3	
Tuscaloosa	AL 35403-2447	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	1000.00	
Name of Employer	Occupation	╡	
University Orthopaedic Clinic	Orthopaedic Surgeon	_	
Receipt For: Primary General	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	2000.00		
SUBTOTAL of Receipts This Page (option	nal)	3250.00	
	<u></u>		
TOTAL This Period (last page this line nu	mber only)		

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 36 OF

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		/ person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th		
Full Name (Last, First, Middle Initial) Thomas E Brown MD Mailing Address 412 Rookwood Dr City Charlottesville FEC ID number of contributing federal political committee. Name of Employer UVA Medical Center Receipt For: Primary General	State Zip Code VA 22903-4732 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 11 09 2012 Transaction ID: A75190E00BD784E91AF2 Amount of Each Receipt this Period 100.00
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) 3. Juliet M DeCampos MD Mailing Address 9400 University Pkwy Ste 309	uliet M DeCampos MD	
City Pensacola	State Zip Code FL 32514-5485	11 09 2012 Transaction ID : AC5CDC3468BB544CB8DA Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Joseph C Duncan MD		
Mailing Address Central Indiana Orthopaedics 3600 W Bethel Ave		11 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Muncie	State Zip Code IN 47304-5407	Transaction ID : A56245A32EED14BDC98C Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation Otheroadia Surgeon	
Self Employed Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		1600.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) ITE

FOR LINE NUMBER: PAGE 37 OF

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	11a 13	y one) 11b 14	11c		12 16		17
y information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson fo	or the	purpose	of solicitin	g co	ntribut	ions	

	statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)	e American Association of Orthopa	
Full Name (Last, First, Middle Initial) Brian R Hamlin MD Mailing Address Suite 1601 300 Halket Street City Pittsburgh FEC ID number of contributing federal political committee. Name of Employer WVU School of Medicine Receipt For: Primary General Other (specify)	State Zip Code PA 15213-3108 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 1.1 09 2012 Transaction ID: A9D6EDA9DB7564F72891 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Douglas Edward Holford MD Mailing Address 410 University Pkwy Ste 1000 City Aiken FEC ID number of contributing federal political committee. Name of Employer CMI Receipt For: Primary General Other (specify)	State Zip Code SC 29801-6800 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 11 09 2012 Transaction ID: AF90CA7EC35C44A26B26 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Bret T Kean MD Mailing Address 2930 SE Carlton St City Portland FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code OR 97202-8650 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 11 09 2012 Transaction ID: A164C76A5CF094018A36 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	>	2000.00
TOTAL This Period (last page this line number	only)	

	FOR LINE	NUMBER	: PAG	iL 38	3
Use separate schedule(s)	(check only	y one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	1	1
,,	12	1/	15	1	

OF 52

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) David M Kieras MD Date of Receipt Mailing Address 33501 1st Way S 09 2012 City Zip Code State Transaction ID: AFE9BBC49504B48DD9F6 WA 98003-6208 Federal Way Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Virginia Mason Med Ctr Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. John O Krause MD Date of Receipt Mailing Address 14825 N Outer Forty Rd Ste 200 11 09 2012 City State Zip Code Transaction ID: A09ECC687321341BE897 Chesterfield MO 63017-2152 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation The Ortho Ctr of St Louis Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Geoffrey M McCullen MD Date of Receipt Mailing Address 2828 Stratford Ave 09 2012 City State Zip Code Transaction ID: AC92876AA6A6D49BA9AB NF Lincoln 68502-4249 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Neurological & Spinal Surgery Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER	: Page	E 39 OF	= 52
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
	13	14	15	16	

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)	he American Association of Orthop	
Full Name (Last, First, Middle Initial)		
Mailing Address 500 University Dr MC H089, PO Box 850		Date of Receipt 1.1 09 2012
City MC H089, PO Box 850	State Zip Code	11 09 2012 Transaction ID : A3818D1D9809B40FA80A
Hershey	PA 17033-2360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Hershey Medical Center	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	, igg. ogaio Tour to Dato 🔻	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) 3. Kent A Reinker MD		Date of Receipt
Mailing Address 928 Hokulani St		11 09 2012
City	State Zip Code	11 09 2012 Transaction ID : A0B066E2F97AB4803B3F
Honolulu	HI 96825-1024	Amount of Each Receipt this Period
		, amount of Each Hecelpt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Retired	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Description: Benjamin David Sutker MD		Date of Receipt
Mailing Address 210 E DeRenne Ave		M = M / D = D / Y = Y = Y
City	State Zip Code	11 09 2012 Transaction ID : ACC3E3A0CAA8E4F34883
Savannah	GA 31405-6736	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	-
Southeastern Orthopaedic Specialists	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		2250.00
TOTAL This Period (last page this line number	er only)	
, , ,		

	FOR	LINE	NU	MBER	:	PAGE	 40	OF
Use separate schedule(s)	(che	ck only	or	ne)				OF 2
for each category of the Detailed Summary Page	X	11a		11b		11c	12	
Detailed Julillary 1 age		12		1/		15	16	Г

52

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full)	the American Association of Orthop	
Full Name (Last, First, Middle Initial) Scott W Walker MD		Date of Receipt
Mailing Address Central Indiana Ortho 3600 W Bethel Ave City	State Zip Code	11 09 2012 Transcript ID ACCOSTON
Muncie	IN 47304-5407	Transaction ID : AC6C640D329AF46CC8F9 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	-
Full Name (Last, First, Middle Initial) 3. Oskar Weg MD Mailing Address 521 Park Ave Lbby 1		Date of Receipt
City New York FEC ID number of contributing	State Zip Code NY 10065-8140	11 09 2012 Transaction ID : A8CAEF1FD8F6248A4AEC Amount of Each Receipt this Period
federal political committee. Name of Employer Park Avenue Sports Med & Rehab Receipt For: Primary General Other (specify)	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	100.00
Full Name (Last, First, Middle Initial) Peter D Wood MD Mailing Address 2404 Mallard Cir		Date of Receipt
City Longmont	State Zip Code CO 80504-7342	11 09 2012 Transaction ID : A90778E1BBE5344928F1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Longmont Clinic Receipt For: Primary General Other (specify)	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional).		1100.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 41 OF 52 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Timothy Francis Wright MD Date of Receipt Mailing Address 2815 W Elk Ave 09 2012 City Zip Code State Transaction ID: A0442E40D5D35485AB4D OK Duncan 73533-1517 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **Duncan Regional Orthopaedics** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jerome J Perra MD Date of Receipt Mailing Address 1171 Southview Drive 11 2012 11 City State Zip Code Transaction ID: A5E2586E61ECA4EEEB14 MN Hastings 55033-3416 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Summit Orthopaedics** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 OF 52 (check only one) 11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of	the Americ	an Association of Ortho	opaedic Surgeons
Full Name (Last, First, Middle Initial) A. American Association of Orthopaec Mailing Address 317 Massachusetts Avenue 1st Floor City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For:	e, NE State DC C Occupation		Date of Receipt 11 21 2012 Transaction ID: A8A5BD45CFC3145428CS Amount of Each Receipt this Period 2022.77 Refund of bank fees from affiliated organization
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 22515.64	
Full Name (Last, First, Middle Initial) B. Mailing Address City	State	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	C		Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) C.			Date of Receipt
Mailing Address	01-1-	To Oak	M = M / D = D / Y = Y = Y = Y
FEC ID number of contributing federal political committee.	State	Zip Code	Amount of Each Receipt this Period
Name of Employer	Occupation	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	l)	2022.77

TOTAL This Period (last page this line number only).....

2022.77

SCHEDULE A (FEC Form 3X)	1		FOR LINE NUMBER. PAGE 42 OF 52
		Use separate schedule(s)	FOR LINE NUMBER: PAGE 43 OF 52 (check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12
			13 14 15 X 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			_
angle Political Action Committee of t	the Americ	an Association of Ortho	opaedic Surgeons
Full Name (Last, First, Middle Initial)			
Stivers for Congress			Date of Receipt
Mailing Address 4679 Winterset Drive			M = M / D = D / Y = Y = Y
City	State	Zip Code	11 21 2012 Transaction ID : A3B14999036C14D18808
Columbus	OH	43220	Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C co	0441352	3000.00
Name of Employer	Occupation	1	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		3000.00	
		7	J.
Full Name (Last, First, Middle Initial)	'		
3			Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	
			Amount of Each Receipt this Period
FEC ID number of contributing	С		
federal political committee.			
Name of Employer	Occupation	l	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	Aggregate	Teal to Bate V	1
Other (specify) \blacktriangledown			
Full Name (Last, First, Middle Initial)			
D			Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	
			Amount of Each Receipt this Period
FEC ID number of contributing	С		
federal political committee.			
Name of Employer	Occupation	1	
Receipt For:			
Primary General	Aggregate	Year-to-Date ▼	
Other (specify)			
			2000.00
SUBTOTAL of Receipts This Page (optional).			3000.00

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE B (FEC Form 3X)	Llos concrete askedula/s\	FOR LINE		PAGE 44 OF 52	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b	(check only one) X 21b 22 23 24		
	Detailed Summary Page	27	28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and State					
or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ime and address of any political	ai committee to	SOIICIT CONTRIBUTIONS TRO	om such committee.	
Political Action Committee of the	American Association	of Orthop	aedic Surgeons		
Full Name (Last, First, Middle Initial)			5		
A. Aristotle International, Inc			Date of Disburseme		
Mailing Address 205 Pennsylvania Ave SE			10 19	2012	
City	State Zip Code		Transaction ID : B	16A4D22C9DDD4479B2I	
Washington Purpose of Disbursement	DC 20003				
Credit card processing fees			Amount of Each Dis	sbursement this Period	
Candidate Name		Category/		175.70	
Office County House		Type	7	173.70	
Office Sought: House Disburse Senate	ement For: Primary General				
President	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial)					
B. Aristotle International, Inc			Date of Disburseme		
Mailing Address 205 Pennsylvania Ave SE			10 26	2012	
City Washington	State Zip Code DC 20003		Transaction ID : B	80E3FBF803DC64B0DB3	
Purpose of Disbursement Credit card processing fees		· · ·	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/	7 intourit of Euch Bio	Surgerificate traile 1 ened	
		Type		265.20	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) C. Aristotle International, Inc			Date of Disburseme	nt	
Mailing Address 205 Pennsylvania Ave SE			11 / 02	2012	
City	State Zip Code		Transaction ID . B	BD595E9BBA2EE4B2093	
Washington	DC 20003		Transaction ID: B	DD393E9BBAZEE4BZU93	
Purpose of Disbursement Credit card processing fees		· · ·			
Candidate Name		Category/ Type	Amount of Each Dis	sbursement this Period 124.00	
Office Sought: House Disburse	ement For:		,		
Senate	Primary General				
President State: District:	Other (specify) ▼				
State. Distillet.					
SUBTOTAL of Disbursements This Page (optional)		·····•		564.90	
TOTAL This Period (last page this line number onl	y)				

SCHEDULE B (FEC Form 3X)			FOR LINE N	NUMBER:		PAGE	45 C)F 52	
ITEMIZED DISBURSEMENTS		eparate schedule(s) (check only one)				heck only one)			
	Detailed Summar		X 21b	22	23	24	25	26	
			27	28a	28b	28c	29	30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam									
NAME OF COMMITTEE (In Full)	c and address of t	arry pontiour		JOHOIT JOHITH		JIII 300II C	01111111111		
Political Action Committee of the A	merican Asso	ociation (of Orthons	aedic Su	raeans				
/ Ontical Action Committee of the At	noncan 7.55c	olation	or Orthopa	acaic ou	igcons				
Full Name (Last, First, Middle Initial)									
A. Northern Trust Company				Date of D	isburseme	ent			
Mailing Address 50 S. LaSalle St.				11	06		012	Y	
City	tate Zip Co	ode							
Chicago	IL 60675			Transac	tion ID : E	D872FB1	2D5914	1134BB7	
Purpose of Disbursement									
Bank fees deducted from account				Amount of	Each Dis	sbursemer	t this F	Period	
Candidate Name			Category/				623	25	
Office Sought: House Disbursem			Туре		7	- 7	020	.20	
		General							
	Other (specify)	aei iei ai							
State: District:	• i.i.e. (opee.i.)								
Full Name (Last, First, Middle Initial)									
B. Northern Trust Company				Date of D	isburseme	ent			
				M = M	D D	/ Y	/ Y	Υ	
Mailing Address 50 S. LaSalle St.				11	06	2	2012		
	tate Zip Co			Transac	tion ID : E	35508BFB	46BEF	45DB85/	
Chicago Purpose of Disbursement	IL 60675	5							
Bank fees deducted from account				Amount of	Each Dis	sbursemer	ıt this F	Period	
Candidate Name			Cotogony					-	
			Category/ Type		7		799	.85	
Office Sought: House Disbursem	ent For:								
	,	General							
	Other (specify) ▼								
State: District:									
Full Name (Last, First, Middle Initial)				Date of D	ichurcomo	unt.			
C. Aristotle International, Inc							/ Y	V.	
Mailing Address 205 Pennsylvania Ave SE				11	09		012	Y	
0.1.	7	1 -							
,	tate Zip Co			Transac	tion ID : E	DCB55F1	042724	173382A	
Purpose of Disbursement	20000	,							
Credit card processing fees				Amount of	Each Dis	sbursemer	ıt this F	Period	
Candidate Name			Category/						
			Type		7		34	.77	
Office Sought: House Disbursem									
	,	General							
State: District:	Other (specify)								
orare. District.									
SUBTOTAL of Disbursements This Page (optional)							1457.	87	
CODITION OF DISDUISEMENTS THIS Page (optional)			·····	-			-	#	
TOTAL This Period (last page this line number only).				L					

S ľ

SCHEDULE B (FEC Form 3X)		FOR LINE	PAGE 46 OF 52		
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the) (check onl	(check only one)		
	Detailed Summary Page	X 21b	22 23 28a 28l		
Any information copied from such Reports and St	ataments may not be cold as				
or for commercial purposes, other than using the	name and address of any polit	ical committee t	o solicit contributio	ns from such committee.	
NAME OF COMMITTEE (In Full)					
Political Action Committee of the	e American Associatio	n of Orthop	paedic Surge	ons	
Full Name (Last, First, Middle Initial)			D / /=::		
A. Aristotle International, Inc			Date of Disbur	rsement	
Mailing Address 205 Pennsylvania Ave SE			11	16 2012	
City	State Zip Code		Transaction	ID : B3418588ADEB44873A9B	
Washington Purpose of Disbursement	DC 20003		-		
Credit card processing fees			Amount of Eac	ch Disbursement this Period	
Candidate Name		Category/		14.00	
Office Sought: House Disbu	rsement For:	Туре	,	11.00	
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial) B.			Date of Disbur	sement	
				D / Y Y Y Y Y	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement			1		
Candidate Name			Amount of Eac	ch Disbursement this Period	
Candidate Name		Category/ Type			
Office Sought: House Disbu	rsement For:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ŕ	
Senate	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C.			Date of Disbur	rsement	
Mailing Address			M M / D	D / Y Y Y Y Y	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement			-		
Candidate Name			Amount of Eac	ch Disbursement this Period	
Candidate Name		Category/ Type			
Office Sought: House Disbu	rsement For:	.,,,,			
Senate	Primary General				
State: District:	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (option	al)			14.00	
	,			2000 ==	
TOTAL This Period (last page this line number of	only)	·····		2036.77	

SCHEDULE B (FEC Fo	rm 3X) [FOR LINE NUMBER: PAGE 47 OF 52						
ITEMIZED DISBURSEME	NTS		parate schedule(s) n category of the	(orlook offiny offic)						
			Summary Page	21b	22	X 23	24	25 29	26	
Г <u> </u>				27	28a	28b	28c		30b	
Any information copied from such Roor for commercial purposes, other the										
NAME OF COMMITTEE (In Full)										
Political Action Commit	tee of the Ar	nerica	n Associatio	n of Orthop	aedic S	Surgeons	3			
Full Name (Last, First, Middle Init	ial)									
A. Chesapeake PAC					Date o	f Disbursem		Y	Y	
Mailing Address 170 Old Enterpris	e Rd				10	22		2012		
P.O. Box 5323 City	S	tate	Zip Code							
Upper Marlboro		MD	20774-1645		Transaction ID : B5756CBE69E914151A70					
Purpose of Disbursement Harris' LPAC					1					
					Amoun	t of Each D	isburseme	nt this F	Period	
Candidate Name				Category/ Type				5000	.00	
Office Sought: House	Disbursem	ent For:	2012		1	,	,			
Senate		Primary	General							
State: President District:		Other (sp	ecify) Other2012							
Full Name (Last, First, Middle Init	ial)		Otherzorz							
B. Friends of Trey Radel,					Date o	f Disbursem	ent			
Mailing Address P.O. Box 1329					10	/ D D D 22		2012	Y	
City Fort Myers		tate FL	Zip Code 33902-1329		Trans	saction ID:	B5387DE3	333D54	1897B5E	
Purpose of Disbursement					1.					
Candidate Name					Amoun	t of Each D	isbursemei	nt this F	Period	
Henry J Radel III				Category/ Type	l L .			2500	.00	
Office Sought:	Disbursem	ent For:	2012	71-	1	,	,			
Senate		Primary	General							
State: FL District: 19		Other (sp	ecify) 🔻							
State: FL District: 19 Full Name (Last, First, Middle Init	ial)									
C. Tim Murphy for Congre					Date o	f Disbursem	ent			
Mailing Addross 400 C Capital St	CW				10	/ D D		7 Y 2012	Υ	
Mailing Address 499 S Capitol St, Suite 420		10 22 2012								
City		tate	Zip Code		Trans	saction ID :	B242FAA	IBDCDO	C4E88BF	
Washington Purpose of Disbursement		OC	20003-4027		-					
r dipose of bisbursement					Amoun	t of Each D	ichurcomo	nt thic E	Pariod	
Candidate Name	Candidate Name Category						isbui semei			
Rep. Tim F. Murphy				Type				5000.	.00	
Office Sought: House	Disbursem					,				
Senate		Primary	∑ General							
State: PA District: 18		Other (sp	ecity) 🔻							
State: PA District: 18										
SUBTOTAL of Disbursements This	Page (optional)							12500.	.00	
	<u> </u>				-					
TOTAL This Period (last page this	ine number only).			·····		-				

SCHEDULE B (FEC Form 3X)	Han and the second	, FOR LINE	PAGE 48 OF 52					
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orliny						
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30b				
Any information conical from such Departs and Old	monto movemat ha salal array							
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
Political Action Committee of the A	American Association	n of Orthon	aedic Surgeons					
\bigvee								
Full Name (Last, First, Middle Initial)			Date of District					
A. Walberg for Congress			Date of Disburseme					
Mailing Address 6769 Teachout Road			10 22	2012				
City	State Zip Code							
Tipton	MI 49287-9807		Transaction ID : B	39F58D0F97759497C91A				
Purpose of Disbursement								
			Amount of Each Dis	sbursement this Period				
Candidate Name		Category/		5000.00				
Rep. Timothy L. Walberg		Type	7	3000.00				
Office Sought: House Disburse Senate	ement For: 2012							
President	Primary							
State: MI District: 07	Carlot (opcolly)							
Full Name (Last, First, Middle Initial)								
B. Comite Pierluisi, Inc			Date of Disburseme	ent				
			10 23 2012					
Mailing Address PMB 232, 1353 Road 19								
City	State Zip Code		Transaction ID · F	310800B4F20874358A04				
Guaynabo	PR 00966							
Purpose of Disbursement			Amount of Each Dis	sbursement this Period				
Candidate Name		Column	A THOUSE OF LACIT DIS	Source and Follow				
Hon. Pedro R. Pierluisi		Category/ Type		5000.00				
	ment For: 2012							
Senate	Primary General							
President	Other (specify) ▼							
State: PR District: 00								
Full Name (Last, First, Middle Initial)			Data of Diahamas	ant.				
C. Louise Slaughter Re-election Com	ımıttee		Date of Disburseme					
Mailing Address 1150 University Avenue			10 23	2012				
Building 5								
City	State Zip Code		Transaction ID · F	3F65278E163894310A13				
Rochester	NY 14607-1647		Transaction ID . E					
Purpose of Disbursement								
Candidate Name			Amount of Each Dis	sbursement this Period				
Rep. Louise M. Slaughter		Category/ Type		5000.00				
	ment For: 2012	.,,,,						
Senate	Primary General							
President	Other (specify)							
State: NY District: 28	- 							
				45000.00				
SUBTOTAL of Disbursements This Page (optional).		·····		15000.00				
TOTAL This Davied (lest need this line assets and	·\							
TOTAL This Period (last page this line number only	·)		1 20 1					

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 49 OF 52									
IT	EMIZED DISBURSEMENTS		parate schedule(s) n category of the	e(s) (check only one)									
			Summary Page		21b 27	22 28a	23 28b	24 28c	25	26 30b			
Ar	ny information copied from such Reports and Staten	nents may	not be sold or us	sed b									
	for commercial purposes, other than using the name												
abla	NAME OF COMMITTEE (In Full)												
$ \rangle$	Political Action Committee of the A	merica	n Associatio	n of	Orthopa	aedic S	Surgeo	ns					
<u></u>	Full Name (Last, First, Middle Initial)												
Α.	Thoroughbred PAC		f Disburse										
	Mailing Address P.O. Box 65116		10 23 2012										
	City			Trans	eaction IF	· R1F4R2	PRCD460	C14B4BB6					
	Washington	DC	20035-5116			ITalis	saction in	7 . D II 4D2	.605400	01404000			
	Purpose of Disbursement Whitfield LPAC			Г		Amoun	t of Each	Disburser	ment this	s Period			
	Candidate Name							1000.00					
	Office Sought: House Disbursen	ment For:	2012		Туре		7	,					
		Primary	General										
	President State: District:	Other (sp	ecify) ▼ Other2012										
_			Otherzorz										
В.	Full Name (Last, First, Middle Initial)					Date o	f Disburse	ament					
٥.	Tulsi for Hawaii		M M / D D /				YY	V					
	Mailing Address P.O. Box 75561					10 23			2012				
	,	State	Zip Code			Trans	saction ID) : B99C2F	3B5E79	12409196F			
	Kapolei Purpose of Disbursement	HI	96707-0561										
	Turpose of Biobarconions			Г		Amoun	t of Each	Disburser	ment this	s Period			
	Candidate Name			Ca	itegory/				25	00.00			
	Tulsi Gabbard				Туре		7	7	20	00.00			
	President	nent For: Primary Other (sp	X General										
_	State: HI District: 02 Full Name (Last, First, Middle Initial)												
C.	Friends of Farr						f Disburse	ement					
	Mailing Address 555 Capitol Mall Suite 1425					10		B1 / Y	2012	Y			
	City	State	Zip Code										
		CA	95814-4602			Trans	saction IE) : B46A60	CE76CA	6C486193 <i>A</i>			
	Purpose of Disbursement			_									
				Amoun	t of Each	Disburser	nent this	s Period					
	Candidate Name		ategory/				25/	00.00					
	Rep. Sam Farr Office Sought: House Disburser	ment For:	0010		Туре		- 7			30.00			
		Primary	General										
	President	Other (sp											
	State: CA District: 17	(-P	· · •										
	<u> </u>					-							
S	SUBTOTAL of Disbursements This Page (optional)				······ >				600	00.00			
,	OTAL This Period (last page this line number only)) 											
1 1	(

SCHEDULE B (FEC Form 3X)	Lloo concrete cohertula/	FOR LINE	PAGE 50 OF 52						
ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the	(orlook orli)							
	Detailed Summary Page		22 X 23 28b	24 25 26 28c 29 30b					
Any information copied from such Reports and Sta	tements may not be sold or	used by any pers	on for the purpose of	soliciting contributions					
or for commercial purposes, other than using the n	ame and address of any pol	litical committee to	solicit contributions f	rom such committee.					
NAME OF COMMITTEE (In Full)									
Political Action Committee of the	American Association	on of Orthop	aedic Surgeons	S					
Full Name (Last, First, Middle Initial)									
A. Friends of Lois Capps	Date of Disbursement								
			M M / D D / Y Y Y Y						
Mailing Address P.O. Box 23940			10 31	2012					
City	State Zip Code								
Santa Barbara	CA 93121-3940		Transaction ID:	B4AAE4B5CB97D4E60B5					
Purpose of Disbursement	30.2.00.0								
			Amount of Each D	isbursement this Period					
Candidate Name		Category/		3000.00					
Rep. Lois Capps		Type		3000.00					
	sement For: 2012								
Senate President	Primary								
State: CA District: 23	Other (specify)								
Full Name (Last, First, Middle Initial)									
B. Jim Renacci for Congress	Date of Disbursement								
			M M / D D	/ Y = Y = Y = Y					
Mailing Address 150 Smokerise Drive			10 31 2012						
City	State Zip Code		Transaction ID :	B11505ECAB55F44C399D					
Wadsworth	OH 44281-8701								
Purpose of Disbursement			Amount of Fach D	isbursement this Period					
Candidate Name		Cotogogy	76						
Rep. James B. Renacci		Category/ Type		4000.00					
Office Sought: House Disburs	sement For: 2012	1							
Senate	Primary General								
President Pictriot: 40	Other (specify)								
State: OH District: 16 Full Name (Last, First, Middle Initial)									
C. Schweikert for Congress			Date of Disbursem	nent					
Conweikert for Congress		M M / D D	/						
Mailing Address 8776 E Shea Blvd Suite B3A-62		10 31	2012						
City	State Zip Code								
Scottsdale	AZ 85260-6629		Transaction ID:	B9410497EFCF243618E5					
Purpose of Disbursement									
			Amount of Each D	isbursement this Period					
Candidate Name		Category/		2500.00					
Rep. David Sheridan Schweikert Office Sought: House Disburs	sement For: 2012	Туре		7					
Senate	Primary General								
President	Other (specify)								
State: AZ District: 05									
SUBTOTAL of Disbursements This Page (optional)	·····		9500.00					
TOTAL This Period (last page this line number or	ıly)		1						

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 51 OF								
IT	EMIZED DISBURSEMENTS		parate schedule(s) category of the	(check only one)								
			Summary Page		21b	22	23	24	25	26		
_					27	28a	28b	28c	29	30b		
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam											
6		ie and add	aress or arry point	cai co	illillittee to	Solicit Co	Titributions	s iroin suci	COMMI	iiee.		
$ \rangle$	NAME OF COMMITTEE (In Full)	morioo	o Association	n of	Orthon	aadia (Suraco	20				
/	Political Action Committee of the A	mencai	1 ASSOCIATIO	11 01	Orthop	aedic s	surgeo	iis				
_	Full Name (Last, First, Middle Initial)											
Α.	Kaptur for Congress	Date of Disbursement										
						M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	Mailing Address P.O. Box 899											
	City											
	Toledo								16078C5	541D8B21		
	Purpose of Disbursement											
						Amoun	t of Each	Disbursen	ent this	Period		
	Candidate Name			Са	tegory/				100	0.00		
	Rep. Marcy Kaptur				Type				100	0.00		
		nent For:										
		Primary	General									
	State: OH District: 09	Other (spe	ecily) 🔻									
_	Full Name (Last, First, Middle Initial)											
В.						Date o	f Disburse	ement				
	Tuisi for Flawaii						M M / D D / Y Y Y					
	Mailing Address P.O. Box 75561					11		19	2012			
		State	Zip Code			Trans	saction ID	: BE1440	B4161FF	473DADE		
	Kapolei Purpose of Disbursement	HI	96707-0561									
	Debt Retirement Primary 2012			Г		Amoun	t of Each	Disbursem	nent this	Period		
	Candidate Name			Ca	tegory/							
	Tulsi Gabbard				Type		,	- 7	250	00.00		
	Office Sought: House Disburser	nent For:	2012									
		Primary	General									
	<u> </u>	Other (spe										
_	State: HI District: 02		Other2012									
_	Full Name (Last, First, Middle Initial)					Date o	f Disburse	ament				
٥.	Wyden for Senate								Y Y	V		
	Mailing Address P.O. Box 3498		м = м 11		9	2012	- '					
	,	State	Zip Code			Trans	saction ID	: B4BB32	65D61B	A4328A24		
	Portland Purpose of Disbursement	OR	97208-3498									
	Tulpose of Dispulsement			Δ	4 af Each	Diah	4 4	Daviad				
	Candidate Name	-0-		Amoun	t of Each	Disbursen	ient this	Period				
	Sen. Ron Wyden				tegory/ Type				250	0.00		
	•	nent For:	2016				,	7				
	∑ Senate ∑	Primary	General									
	President	Other (spe	ecify) 🔻									
_	State: OR District:											
									600	0.00		
Ľ	GUBTOTAL of Disbursements This Page (optional)				······ >		,	,	300	5.55		
۱,	**OTAL This Period (last page this line number only)											
	(.act page mic manipol omy)											

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 52 OF 52							
ITEMIZED DISBURSEMENTS	Use separate schedule(s	(check only							
	for each category of the Detailed Summary Page	21b	22 🗶 23	24 25 26					
	Dotailou cummary r ago	27	28a 28b	28c 29 30b					
Any information copied from such Reports and Staten									
or for commercial purposes, other than using the name	ne and address of any polit	ical committee to	solicit contributions for	rom such committee.					
NAME OF COMMITTEE (In Full)									
angle Political Action Committee of the A	merican Association	n of Orthop	aedic Surgeons	3					
Full Name (Last, First, Middle Initial)									
A. Charles Boustany Jr. MD for Cong	ress		Date of Disbursem	ent					
		M = M / D = D / Y = Y = Y							
Mailing Address P.O. Box 80126			11 20	2012					
City	State Zip Code								
Lafayette	LA 70598-0126		Transaction ID :	B112C2CB6796841F49AC					
Purpose of Disbursement	7,0000,0120								
			Amount of Each D	isbursement this Period					
Candidate Name		Catamanul							
Rep. Charles W. Boustany Jr.		Category/ Type		5000.00					
	nent For: 2012	.,,,,,	,	,					
Senate	Primary General								
President	Other (specify) ▼								
State: LA District: 07	Runoff2012	2							
Full Name (Last, First, Middle Initial)									
B. Vargas for Congress 2012			Date of Disbursem	ent					
vargas isi Gongioss 2012			M M / D D / Y Y Y Y						
Mailing Address 5429 Madison Ave			11 20	2012					
-									
City	State Zip Code		Transaction ID :	BC8D77C0FFA474C0FB9D					
Sacramento	CA 95841		Transaction is:	5005110011A414001B35					
Purpose of Disbursement									
Candidate Name			Amount of Each D	isbursement this Period					
		Category/	2500.00						
Sen. Juan Vargas Office Sought: House Disbursen	and Fam. and	Туре							
	nent For: 2014								
Senate Yresident	Primary General								
State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial) C.			Date of Disbursem	ont					
o .									
Mailing Address			M M / D D	/					
Mailing Addices				-					
City	State Zip Code								
	, , , , , , , , , , , , , , , , , , ,								
Purpose of Disbursement									
		Amount of Each D	isbursement this Period						
Candidate Name		Category/							
		Type							
Office Sought: House Disbursen									
	Primary General								
President	Other (specify) ▼								
State: District:									
				7500.00					
SUBTOTAL of Disbursements This Page (optional)		·····		7500.00					
				ECEOO 00					
TOTAL This Period (last page this line number only)			4	56500.00					